

☒ This form is attached to Child Custody and Visitation Order (DV-140).

1 Protected person's name: \_\_\_\_\_ ☐ Mom ☐ Dad ☐ Other

2 Other parent's name: \_\_\_\_\_ ☐ Mom ☐ Dad ☐ Other

**The Court Orders:**

3 Parent to be supervised is: ☐ Mom ☐ Dad ☐ Other (name): \_\_\_\_\_

**4 Type of Visitation**

- ☐ a. Supervised visitation  
☐ b. Supervised exchange only  
☐ c. Therapeutic visitation (licensed mental health professional)

**5 Type of Provider**

- ☐ a. Professional (individual or supervised visitation center)  
☐ b. Nonprofessional

**6 Provider's Information**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone #: \_\_\_\_\_

7 **Schedule of Visits** — see Form DV-140.

**8 Costs will be paid as follows:**

- Mom to pay: \_\_\_\_\_ %  
■ Dad to pay: \_\_\_\_\_ %  
■ Other: \_\_\_\_\_

**9 Contact With Provider**

- Mom to contact provider before (date): \_\_\_\_\_  
■ Dad to contact provider before (date): \_\_\_\_\_  
■ Other: \_\_\_\_\_

10 **The court also orders (specify):** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**This is a Court Order.**